## **Ventura Alliance HH Criteria for Good Standing**

			ursday, April 11, 2019 ENDEES AND AD HOC	
Attendee		Position / Sign-in	Company	Type of attendee
Amanda Larson		Chair – Present	Mission Home Health	Home Health
Chris Cortez		Secretary - Present	Assisted Home Health	Home Health
Bonnie Subira		Present	CMHS	Hospital
Matthew Tufte		Email only	VCMC	Hospital
Cerri Mansfield		Email only	VCMC	Hospital
Carmen Cano		Absent	Las Posas Home Health	Home Health
Teri Helton		Present	Livingston MVNA	Home Health
Molly Buck		Present	Los Robles Home Health	Home Health
Joan Plassmeyer		Present	Los Robles Home Health	Home Health
Keon Marden		Present	Summit Home Health	Home Health
			Access TLC	Home Health
Item		Who/What/How	/Where/Why/When	Time
Purpose	health ag	Illy address how to approgencies not meeting criters of FY 2018 data. Folders	5 Minutes	
Criteria 1	Attendance and Participation:			5 Minutes
Criteria 2	Certifications and Accreditations:			3 Minutes
Criteria 3	• [ • A • L	ngs for quality and patien Discussion of any POC upon Amanda and Chris to revious Exppropriateness Discussion of sharing of Pass OASIS training.	dates	5 Minutes

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Criteria 4	Readmissions to hospital:	15 Minutes
Criteria 5	Liaisons:  Review: HH appropriate discussion with CM Discussion of any POC updates	15 Minutes
Criteria 6	Acceptance of referrals / Coverages:	5 Minutes
Criteria 7	<ul> <li>SOC within 24 hours of hospital discharge:         <ul> <li>Chart review for FY 2018</li> </ul> </li> <li>Discussion of any POC updates</li> <li>Discussion of MC guideline. Carmen (LPH) to provide update.</li> <li>Chris brought in COP G514 that states HH agency must open patient within 48 hours of order or DC from hospital/SNF. Copy given to Amanda for future discussion</li> </ul>	10 Minutes
Criteria 8	<ul> <li>Agency Care and Hospital Discharge:         <ul> <li>Review re-admit data and trend chart by hospital &amp; Same Day by hospital system for FY 2018</li> </ul> </li> <li>Does DH have the capability to pull readmit data for Non-Alliance HH agencies</li> <li>Discussion of what is needed for HH SOC, as it pertains to barriers to SOC in 24hours. Teri (LMVNA to bring documentation)</li> <li>Teri showed OASIS Reference of what is needed for SOC to HH. Bonnie to bring to Steering committee and then to Liaison committee.</li> <li>Do we have the Steering Committee Criteria?</li> <li>Bonnie to check with Sally to see if final version of criteria ready</li> <li>We will watch each hospitals readmission numbers by hospital for the next 2 quarters to see if an upward trend and additional review of readmits needed. We will be set up a flow chart on how to go forward with review of this</li> </ul>	15 Minutes
Criteria 9	Data tracking:  • Insurance drop down does not have Medi-Cal option	10 Minutes

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	<ul> <li>SOC in 24 hours – requested addition of referral after DC, No orders upon DC/no auth</li> <li>Discussion of LACE tool, when the liaison committee decides on the LACE tool the committee will ask to have the above items added to the Formstack tool.</li> </ul> Requests of other committees: (April Meetings)	
Other	<ul> <li>Liaison committee – Updated Liaison List</li> <li>Liaison committee – What is the discussion with CM at hospital re: patients that are not appropriate for HH? (i.e. Q8 IV, no teachable caregiver, not stable, etc)</li> <li>Steering Committee – We are invested into SOC within 24 hours, but we are facing barriers of receiving necessary information. SOC within 24 hours is only reasonable if we are provided the appropriate items from the hospital. – More to be outlined at April Meeting before going to Steering Committee.</li> <li>Steering committee will be asking each workgroup to work on an escalation protocol/process to resolve any issues that come up.</li> </ul>	10 Minutes
Next Meeting	Plan: Next Meeting: Thursday May 9th <sup>,</sup> at 9:30 at Camarillo Hospice	